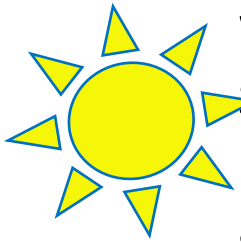


# The Portland Resource

Aging and Disability  
Resource Center of  
Fond du Lac County

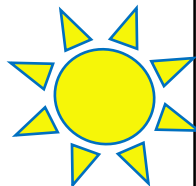
Summer  
2016



We hope you enjoy the Summer Edition of The Portland Resource. As always, you can get a copy of The Portland Resource by...

- Requesting your name be added to the mailing list (either by email or mail) by calling (920) 929-3466 or emailing [adrc@fdlco.wi.gov](mailto:adrc@fdlco.wi.gov)
- Picking up a copy at the Fond du Lac Senior Center, Ripon Senior Center, Senior Services (city/county building) or at the ADRC.

Any feedback or questions,  
please contact Jackie at (920) 929-3466.



*Contact Us*

...

The Aging & Disability  
Resource Center of  
Fond du Lac County is  
located at

50 N. Portland  
Street  
Fond du Lac, WI  
54935

Office Hours:  
Monday-Friday  
8:00 am- 4:30 pm  
(920) 929-3466  
[www.fdlco.wi.gov/adrc](http://www.fdlco.wi.gov/adrc)

**Walk-Ins  
Welcome!**

## A Word from the Disability Benefit Specialist... Lynnette Benedict

### DISCOVER THE COURAGEOUS FACES OF DISABILITY

#### Article By:

**Bob Trotter, Social Security Public Affairs Specialist in Milwaukee, WI**

Social Security is committed to the principles and spirit of the Americans with Disabilities Act (ADA), which improves the lives of our beneficiaries and our employees who have disabilities. We are proud to say that we've been helping people with disabilities for over 25 years.

We also want you to see and hear from the people who rely on Social Security disability benefits to not just survive, but thrive, as active members of our communities. Our *Faces and Facts of Disability* website highlights the real life stories of people who have disabilities.

The newest person we are featuring on our *Faces and Facts of Disability* website is Lynne Parks. She is an artist from Baltimore, Maryland. First diagnosed with metastatic fibrosarcoma at age 14, she has lived with this illness for nearly 35 years. It started in her face and moved to different parts of her body, including her abdomen and leg. She also has various tumors on her shoulder and arm.

Inflammatory responses, infections, and new tumors are complications that Lynne deals with every day. "Because of the tumors, I have limited use of my left arm," Lynne said. "I have weakness in my legs. There's fatigue because my immune system has taken such a big hit from the cancer and the cancer treatments. I get sick all the time. There might be a day that I can be at home and resting and I'll try to make the best of it. I'll wake up, fix breakfast and eat, and that takes a while because of my physical limitations, but also because of my first tumor that was in my face."

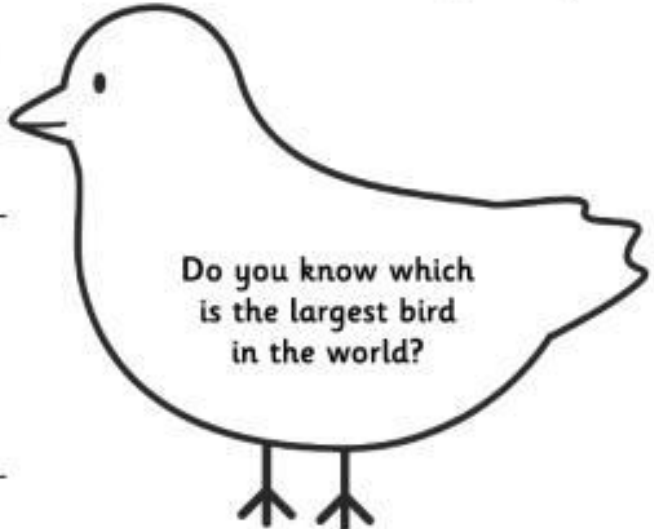
Having been helped by Social Security, Lynne tries to help others. "I'm also helping people who have issues learn to cope with them, because they see in me someone as a role model, essentially. Life without Social Security benefits, it's a horror story, because I imagine myself on the streets." The disability benefits Lynne receives are a crucial resource for her quality of life. Our disability programs continue to be a mainstay in the lives of many people — people just like you. Social Security disability beneficiaries are among the most severely impaired people in the country. It's something that can happen to anyone when least expected.

We invite you to learn the facts about the disability insurance program, and see and hear these stories of hardship and perseverance at [www.socialsecurity.gov/disabilityfacts](http://www.socialsecurity.gov/disabilityfacts).

## Garden Bird Scramble

Can you unscramble the letters to reveal  
14 birds that you might be lucky enough  
to find in the garden?

1. rdpwoekeco    \_\_\_\_\_
2. dvoe        \_\_\_\_\_
3. ingeop      \_\_\_\_\_
4. lawoslw     \_\_\_\_\_
5. nlsagtri     \_\_\_\_\_
6. olw         \_\_\_\_\_
7. amipeg      \_\_\_\_\_
8. bacblkidr    \_\_\_\_\_
9. rhshtu      \_\_\_\_\_
10. twsif       \_\_\_\_\_
11. ewnr        \_\_\_\_\_
12. onrib       \_\_\_\_\_
13. cnfhiafc    \_\_\_\_\_
14. porsraw     \_\_\_\_\_



Copyright © www.ActivityVillage.co.uk - Keeping Kids Busy

Source: <http://www.activityvillage.co.uk/garden-bird-scramble>

- June is National Safety Month
- July is Parks & Recreation Month
- August is National Immunization Month



# Adopt 10 Ways to Love Your Brain and help reduce your risk for cognitive decline

Submitted by Ginny Nyhuis with the Wisconsin Alzheimer's Association

The evidence is mounting: You can reduce your risk of cognitive decline by making key lifestyle changes. That is the conclusion of a new research summary published in *Alzheimer's & Dementia: The Journal of the Alzheimer's Association*. With this in mind, the Alzheimer's Association® offers 10 Ways to Love Your Brain, tips that may reduce risk of cognitive decline.

1. **Break a sweat.** Engage in regular cardiovascular exercise that elevates your heart rate and increases blood flow. Studies have found that physical activity reduces risk of cognitive decline.
2. **Hit the books.** Formal education will help reduce risk of cognitive decline and dementia. Take a class at a local community college, community center or online.
3. **Butt out.** Smoking increases risk of cognitive decline. Quitting can reduce risk to levels comparable to those who have not smoked.
4. **Follow your heart.** Risk factors for cardiovascular disease and stroke — obesity, high blood pressure and diabetes — negatively impact your cognitive health.
5. **Heads up!** Brain injury can raise risk of cognitive decline and dementia. Wear a seat belt, use a helmet when playing contact sports or riding a bike.
6. **Fuel up right.** Eat a balanced diet that is higher in vegetables and fruit to help reduce risk of cognitive decline.
7. **Catch some Zzz's.** Not getting enough sleep may result in problems with memory and thinking.
8. **Take care of your mental health.** Some studies link depression with cognitive decline, so seek medical treatment if you have depression, anxiety or stress.
9. **Buddy up.** Staying socially engaged may support brain health. Find ways to be part of

your local community or share activities with friends and family.

10. **Stump yourself.** Challenge your mind. Build a piece of furniture. Play games of strategy, like bridge.

Visit [alz.org/10ways](http://alz.org/10ways) to learn more about these tips, your brain, cognitive decline, and Alzheimer's disease and other dementias.

June is Alzheimer's & Brain Health Awareness Month and the Alzheimer's Association® is asking people across the world to take the Purple Pledge and join the international conversation about Alzheimer's disease. Everyone who has a brain is at risk to develop Alzheimer's, a fatal disease that cannot be prevented, cured or even slowed. But everyone can do something to fight it — especially you.

Take the Purple Pledge today at [alz.org/pledgepurple](http://alz.org/pledgepurple) and commit to one or more of the following actions:

- Wear purple throughout the month and especially on Monday, June 20 — The Longest Day®.
- Ask friends and family to take the pledge and grow the cause.
- Turn your Facebook profile picture purple.
- Educate your employees about Alzheimer's disease.
- Turn your office purple or create a purple-themed cafeteria.
- Sign up to be an advocate.

Currently, 47 million people worldwide are living with Alzheimer's or another dementia. You can help. Visit [alz.org/pledgepurple](http://alz.org/pledgepurple) to get started.



2 0 1 6  
**WORLD ELDER ABUSE  
 AWARENESS DAY**

**June 15<sup>th</sup> is World Elder Abuse Awareness Day!**

If you suspect someone is a victim of Elder Abuse, contact the ADRC at (920) 929-3466 to make a report. Help us take a stand against elder abuse!

Last year, 110 **Adult Protective Services Cases** were investigated in Fond du Lac County. Of those **110, 83** individuals were considered elderly (age 60+).

In honor of World Elder Abuse Awareness Day, the ADRC will be setting up a banner and pinwheels in Fond du Lac County Veterans Park on the corner of 4<sup>th</sup> and S. Main Street from 6/10/15 to 6/20/15. Each pinwheel at this display represents an investigation that the ADRC of Fond du Lac County completed in 2015.

**Please come check out the display and helps us take a stand against elder abuse!**

**For additional information on World Elder Abuse Awareness Day check out the NECA webpage!**

[http://www.ncea.aoa.gov/Get\\_Involved/Awareness/WEAAD/index.aspx](http://www.ncea.aoa.gov/Get_Involved/Awareness/WEAAD/index.aspx)



# RECIPE BOX

## **Double Berry Pie Squares** \*Diabetic Friendly!\*

- **Makes:** 9 servings
- **Serving Size:** 1 square and 1/2 tablespoon dessert topping
- **Carb Grams Per Serving:** 25

### **Ingredients**

- 1/3 cup sugar or sugar substitute\* equivalent to 1/3 cup sugar
- 1 envelope unflavored gelatin
- 1 pound fresh strawberries, hulled and diced
- 1 12 - ounce package frozen raspberries, thawed
- nonstick cooking spray
- 2/3 cup finely crushed graham crackers
- 2 tablespoons sugar or sugar substitute\* equivalent to 2 tablespoons sugar
- 2 tablespoons butter, melted
- 1/3 cup frozen sugar-free whipped dessert topping, thawed



### **Source:**

<http://www.diabeticlivingonline.com/print/7>

### **Directions**

1. For filling: In a large saucepan, combine the 1/3 cup sugar and the gelatin; add strawberries and raspberries. Cook and stir over medium-high heat until gelatin is dissolved and mixture is simmering.
2. Transfer berry mixture to a shallow bowl. Chill about 45 minutes or until mixture begins to set up around the edges, stirring occasionally.
3. For crust: Lightly coat a 2-quart square baking dish with cooking spray. In a medium bowl, stir together finely crushed graham crackers, the 2 tablespoons sugar, and the melted butter. Press graham cracker mixture evenly over the bottom of the prepared baking dish. Place in freezer while chilling filling.
4. Carefully pour filling over the crust. Chill about 3 hours or until filling is completely set.
5. Cut into squares to serve. Top with whipped dessert topping. Makes 9 servings (1 square and 1/2 tablespoon dessert topping per serving)

**Tip** \*Sugar Substitute: Choose from Splenda® Granular or Sweet'N Low® bulk or packets. Follow package directions to use product amount equivalent to 1/3 cup and 2 tablespoons sugar.

\*Sugar Substitute: PER SERVING WITH SUBSTITUTE: same as above, except 103 cal., 16 g carb. Exchanges: 0 other carb. Carb Choices: 1.

### **Nutrition Facts Per Serving:**

Servings Per Recipe: 9

PER SERVING: 138 cal., 4 g total fat (2 g sat. fat), 7 mg chol., 80 mg sodium, 25 g carb. (4 g fiber, 15 g sugars), 2 g pro.

### **Diabetic Exchanges**

Fruit (d.e): 1; Other Carb (d.e): 0.5; Fat (d.e): 1;



# Word Search



G	N	P	A	I	E	T	K	D	A
L	Q	S	P	I	N	A	C	H	F
A	P	P	O	K	G	T	M	P	J
C	U	L	E	T	T	U	C	E	H
H	M	F	S	A	Z	U	C	P	O
N	P	G	Y	L	S	A	R	P	N
S	K	T	O	M	A	T	O	E	Y
C	I	B	R	A	M	C	O	R	N
R	N	C	A	R	R	O	T	S	C
A	R	A	D	I	S	H	F	I	B
J	I	C	P	O	A	K	R	Z	X

Peas

Tomato

Corn

Lettuce

Radish

Spinach

Carrots

Pumpkin

Peppers



Source: <http://www.vegetable-gardening-online.com/support-files/word-search.pdf>

# Aging Parents At A Distance Who Aren't Really "Just Fine"

By Lisa Esposito, Staff Writer US News

Editor's Note: This story was written with support from the Journalists in Aging Fellowships, a program of New America Media and the Gerontological Society of America, sponsored by the Silver Century Foundation.

"I'm doing fine." It's reassuring to hear when you call a parent who lives far away. But the fact is, seniors living alone in their 70s and beyond may keep serious problems to themselves because they don't want to worry you or feel like a burden. Sometimes it takes a crisis – like a call from the hospital – to realize how far from fine a family member really is. Visiting in person is the best way to see what's what, experts agree. And witnessing the gaps in a parent's well-being is the first step to getting the right help.

## Pride and Independence

Amoke Alakoye, of Silver Spring, Maryland, is a dedicated family caregiver. Alakoye lives with and looks after her mother, a multiple stroke survivor. She also acts as the long-distance caregiver for her aunt in Philadelphia. The two elderly siblings are in daily contact, Alakoye says, by phone or online. During her own frequent phone chats, Alakoye says, her aunt is more likely to say "I'm fine" than speak frankly about any difficulties.

It took a weekend family celebration for Alakoye to get a truer picture. In their shared hotel suite, she could see her aunt struggling with arthritis and other health problems, affecting her hygiene and grooming. "I said, 'Oh, we're going to have a spa day,'" Alakoye recalls. "So she wouldn't be upset with me. So I could bathe her and show her how, if she lived in an assisted living facility, they'd have a roll-in shower." But her aunt still lives alone in her home with its standard bathtub, so Alakoye has arranged for a home health aide who comes in several times a week.

Alakoye's personal experiences with caregiving have motivated her to become a gerontologist. But as many experts in helping professions find, Alakoye's most challenging cases are her own flesh and blood. It requires tact and diplomacy to suggest changes or solutions. "I can't tell you about the level of cajoling that goes into it at this point, because there's a lot of pride," she

says. "They cared for you. How dare you tell them now what to do?"

## What to Look For

Nora Jean Levin, executive director of Caring from a Distance, says holidays are prime times for concerned adult children to notice problems and reach out to her organization. "Suddenly they have noticed as they're in the house: The mail is piling up; the garden hasn't been tended to; the laundry is all over the place; the house doesn't look good," Levin says. "Or the family member looks very pale; they may not be taking their medications as they're supposed to be."

Sandy Markwood, CEO of the National Association of Area Agencies on Aging, says transportation is a huge issue for seniors and the top reason people ask about elder care. Scrapes on the car door can be clues indicating trouble, she says. Parents may limit driving at night or make excuses not to go to the doctor because it's raining. The issue becomes how to prevent accidents while keeping parents' worlds from shrinking.

In the kitchen, ominous signs include charred pots and pans or burn marks on the stove or countertops. Expired food in the refrigerator can signal problems with regular grocery shopping and good nutrition.

Unfilled prescriptions or chaotic medicine assortments suggest needed treatments are being missed or the potential for dangerous drug mix-ups. "The other thing is bruises," Markwood says, "when somebody is bumping into the furniture or falling." Taking a tour of the house can reveal fall-related hazards and suggest solutions. Face-to-face conversations can give you a lot of insight. You could pick up on a parent's disorientation or confusion, Markwood says. Parents who don't want to do things they've always done, display changes in mood or personality or don't get out anymore could indicate early-onset depression.



Caregivers in a couple may be struggling, too. "The stress of caregiving can often impact the quote-unquote 'well' spouse to the point that they become ill and they're both in a compromised health situation," Markwood says. "If you've got an 85-year-old caring for an 89-year-old, they probably both need some support."

### **Isolation in Plain Sight**

In a recent study of senior housing, nearly 35 percent of the older adults interviewed were classified as socially isolated but unrecognized as such by staff, says study co-author Harry Owen Taylor, a doctoral student in social work at Washington University in St. Louis. There was a strong connection between subjective isolation – when people perceived themselves as isolated – and symptoms of anxiety and depression. Seniors with friends and family living nearby did significantly better, Taylor says.

### **Neighbors Know**

"My feeling is that aging in place works until it doesn't," says Alice Fisher, founder of the Radical Age Movement. She's seen several elderly relatives cross that line.

Until last year, Fisher's mother-in-law, then 91, lived alone in Delray Beach, Florida. During previous family visits, she appeared a bit frailer each time. "The last couple of times we begged her to let us move her to New York," Fisher says. "She was a very independent, forceful woman who said, 'Absolutely not.'"

Last October, an alarming phone call changed everything. Fisher's mother-in-law reluctantly admitted she had fallen on the floor and lain there several hours before somebody found her. After the hospital staff bandaged wounds on her legs and released her, a next-door neighbor brought her home.

To the couple's shock, the neighbor later told them there had been several previous fall-related incidents in which Fisher's mother-in-law promised to inform the family but never followed through. This time, Fisher says, "Her neighbor told her, 'I want you to call your children now, while I'm here. Because I'm not leaving until you do.'"

Robin Levine, a retired medical geriatric social worker who worked in New York and now resides

in Florida, sees many such situations. Parents don't want to seem needy, Levine says. "The children are busy; they're working; they have kids. So they say, 'Yeah, everything's fine.' And when a child eventually does come down, they say, 'Oh my gosh, you're not fine – you're not fine at all.'"

Start seeking help when you first feel uneasy. "You will realize after that you should have done it a while ago," Levine says. Her other advice to adult children living at a distance: "Open your eyes. Try and really see what's going on and not what you want to be going on."

### **Pressure to Age in Place**

Society sends a strong message that successful aging means living continuously in your own home for as long as possible, says Stephen Golant, a University of Florida gerontologist and geographer and author of "Aging in the Right Place." It may take a crisis or major upheaval to make people rethink the matter, Golant says, such as the death of a spouse, a serious fall, a bad car accident or repeated hospitalizations. The challenging gray area is when less-dramatic events begin to add up, he says. Hired caregivers can fill gaps, Golant says. But it's hard to substitute for a family member during the vulnerable period after a hospital discharge, for instance, when someone needs to talk to health care providers and make sure the patient receives follow-up treatments and is taking medicine properly.

There can be a tipping point when it's clear that aging in place isn't working. For the older person, Golant says, it's when the feeling of incompetence and being out of control trumps the familiar comfort and attachment to home – memories, friends and possessions.

From the perspective of the concerned family member, he says, "It's when your uncertainty level reaches a point where you dread receiving a phone call at any time of the day or night."

"As much as possible, recognize you're dealing with someone who has had a very rich and competent and wonderful life," Golant says. "And as much as possible, respect their integrity and desire to age in place." At the same time, he adds, recognize when living on their own puts parents' security and quality of life at risk.

Source: <http://health.usnews.com/wellness/articles/2016-03-30/aging-parents-at-a-distance-who-arent-really-just-fin>



50 North Portland Street  
Fond du Lac WI 54935

If your organization is interested in submitting an article to the newsletter, please contact Jackie 920-929-3466, TTY: Use Relay (711), or email [adrc@fdlco.wi.gov](mailto:adrc@fdlco.wi.gov).

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(920) 929-3466, TTY: Use Relay, or email  
[adrc@fdlco.wi.gov](mailto:adrc@fdlco.wi.gov).**

**Please watch for our Fall Edition of the Portland  
Resource in September 2016!**